



State of Michigan

Department of Human Services
Children's Protective Services
(CPS) Program Office 2014
Mandated Reporting



Michigan's Department of Human Services provides for child welfare services that include protective services, foster care, juvenile justice and adoption.

Child Welfare Services

Training Goals

After successful completion trainees will:

- Have an understanding of mandated reporting, including its history.
- Know about the current Child Protection Law (CPL) reporting requirements including recent updates.
- Learn to recognize child abuse and neglect.
- Be able to explain the importance of reporting.
- Know the reporting process.
- Understand the procedure after reporting.

Curriculum

- Overview
- State Law
- Recognizing child abuse and neglect (CA/N)
- Reporting
- Initiatives and Updates
- Contact information

Overview

Children's Protective Services

- Responsible to investigate and respond to allegations of abuse and neglect.
- Seeks child safety first and foremost; also supports family connections and promotes child and family well-being.
- Operates under Michigan and federal law and DHS child welfare policy.



Overview

CPS Collaboration

The Child Protection Law, 722.628 Sec. 8(6) requires use of:

Model Child Abuse Protocol with an Approach Using a Coordinated Investigative Team

"The Model Protocol is an investigative and systems roadmap to provide for better coordination of prosecutor, law enforcement, children's protective services workers, child advocacy center staff, medical, mental health, school and friend of the court staff who deal in child abuse cases."

Overview

Scope of Abuse and Neglect

- Between March 2012 and March 2013, over 289,000 calls were made to Centralized Intake.
- 171,000 of those were child abuse and/or neglect complaints.
- And more than 86,000 of those were assigned for investigation.

❖ State of Michigan statistics

Overview

Scope of Abuse and Neglect

- 11,760 of those victims were three years old or younger.
- Rates of confirmed abuse have increased for the past six years.
- More than half (62 percent) of all child deaths reviewed in 2011 were preventable.

❖ State of Michigan statistics

Overview

Sleep Related Deaths

In 2010, regarding all unsafe sleep deaths:

- Over 65% occurred to children with Medicaid.
- Over 13% had active WIC involvement.
- Over 16% had prior CPS involvement.

And nearly all indicate an awareness of safe sleep practices. *Over 65% had a crib.*

Overview

Other thoughts

- Child abuse and neglect (CA/N) crosses all socioeconomic classes.
- CA/N happens to seemingly ordinary people in all walks of life.
- There are two definitions of CA/N, legal and operational, and it's important to understand the distinction.
- There can be a fine line between CA/N and poor parental decision-making.

Overview

Other thoughts



The Biggest Myth about Child Abuse

The biggest myth is that the dangers to children come from strangers. In most cases, the perpetrator is someone the parent or child knows, and is often trusted by the child and family.

State Law

Child Protection Law, 1975, PA 238

*The Michigan Child Protection Law, 1975 PA 238, requires the reporting of child abuse and neglect by certain persons (called **mandated reporters**) and allows the reporting of child abuse and neglect by all persons. It includes the legal requirements for reporting, investigating, and responding to child abuse and neglect cases.*



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State Law

Legal definition of child abuse

- Harm or threatened harm to a child's health or welfare that occurs through:
 - Non-accidental physical or mental injury, sexual abuse, sexual exploitation or maltreatment,
 - To a child under 18 years of age,
 - By a perpetrator who is a parent, legal guardian, or any other person who is responsible for the child's health or welfare, or a teacher, a teacher's aide or a member of the clergy.

State Law

Legal definition of child neglect

- Harm or threatened harm to a child's welfare that occurs through either of the following:
 - Negligent treatment, including the failure to provide adequate food, clothing, shelter or medical care.
 - Placing the child at an unreasonable risk to the child's health or welfare by failure of the parent, legal guardian or other person responsible for the child's health or welfare to intervene to eliminate that risk when that person is able to do so and has, or should have, knowledge of that risk.

State Law

Legal definition of person(s) responsible

- Parent
- Legal Guardian
- Person 18 years of age or older who resides for any length of time in the same home in which the child resides, or
- Non-parent adult

State Law

Legal definition of person(s) responsible (non-parent adult)

- Person 18 years or older who, *regardless of where they live*, meets all of the following criteria:
 - Substantial and regular contact with the child.
 - Close, personal relationship with the child's parent/person responsible for the child's welfare.
 - Is not the child's parent or otherwise related to the child by blood or affinity to the third degree.

List of Mandated Reports

A physician, dentist, physician's assistant, registered dental hygienist, medical examiner, nurse, person licensed to provide emergency medical care, audiologist, psychologist, marriage and family therapist, licensed professional counselor, social worker, licensed master's social worker, licensed bachelor's social worker, registered social service technician, social service technician, a person employed in a professional capacity in any office of the friend of the court, school administrator, school counselor or teacher, law enforcement officer, member of the clergy, regulated child care provider, or any employee of an organization or entity that, as a result of federal funding statutes, regulations, or contracts would be prohibited from reporting in the absence of a state mandate or court order (e.g., domestic violence providers).

The list also includes specific DHS personnel:

Eligibility specialist, Family Independence manager, Family Independence specialist, social services specialist, social work specialist, social work specialist manager and welfare services specialist.

State Law

Penalties of not reporting

- Criminal penalties
 - 90 days in jail
 - Fine
- Civil penalty
 - Libel for injuries



State Law

Penalties of not reporting

- <http://caselaw.findlaw.com/mi-court-of-appeals/1074452.html>
- http://scholar.google.com/scholar_case?case=3727717934895625957&q=People+v.+Cavaiani+1988&hl=en&as_sdt=2,23&as_vis=1

State Law

Protections for reporters

- **Immunity Protection**
 - Good faith
- **Confidentiality Protection** – The identity of the reporting person is subject to disclosure *only*:
 - With the consent of that person
 - By judicial process
 - As per Sec. 5 of the CPL



Recognizing Child Abuse and Neglect (Types)

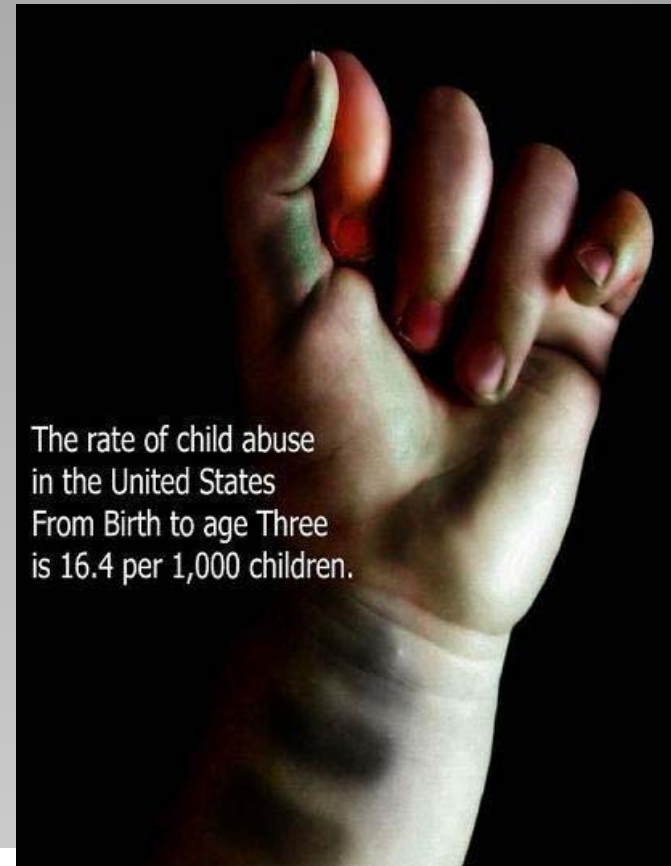
- Physical abuse
- Sexual abuse
- Mental injury
- Neglect
- Maltreatment
- Other



Recognizing Child Abuse and Neglect (Physical abuse)

Physical abuse is a non-accidental injury and may include, but is not limited to, burning, beating, kicking and punching.

There may be external physical evidence of bruises, burns, broken bones or other unexplained injuries. Internal injuries may not be readily apparent.



The rate of child abuse in the United States From Birth to age Three is 16.4 per 1,000 children.

Recognizing Child Abuse and Neglect (Physical abuse)

Physical injuries may include:

- Marks and/or bruises
- Burns
- Fractures
- Drowning
- Internal injuries
- Other

Recognizing Child Abuse and Neglect (Physical abuse)

Facial injury indicators:

- Bruises are the most common injury sustained to the head and face.
- Victims are most commonly 0 to 3 years old.
- Examples of facial injuries may include slap marks, grab marks, knuckle marks, injuries to ears and scalp.

Recognizing Child Abuse and Neglect (Physical abuse)

Slap mark indicator example:



Linear Marks
Horizontal
Spaced

Recognizing Child Abuse and Neglect (Physical abuse)

Grab mark indicator example:



Bruises resulting from grabbing the upper arm.

Recognizing Child Abuse and Neglect (Physical abuse)

Object injury indicator example:

Object injuries tend to take the shape of the object.

These are loop marks and are very suspicious for abuse.



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Recognizing Child Abuse and Neglect (Physical abuse)

Infant injury indicators:

- Bruising and other soft tissue injury is extremely uncommon in children younger than 6 months of age and increases in frequency as children become older and more mobile.
- Any bruising on an infant should be considered suspicious for abuse.
- “If you don’t cruise, you don’t bruise”.
(children under the age of 3 are most at risk for abuse)

Recognizing Child Abuse and Neglect (Sexual abuse)

- Any intentional touching/contact that can be reasonably construed as being for the purpose of arousal, gratification or any other improper purpose by the perpetrator.
- Sexual penetration (any intrusion, however slight).
- Accosting, soliciting or enticing to commit, or attempt to commit an act of sexual contact or penetration, including prostitution.

Recognizing Child Abuse and Neglect (Sexual Abuse)

Human Trafficking indicators:

- Minor may not identify themselves as a victim.
- Victims and perpetrators are often skilled at concealing their situations.
- Minors live with other unrelated youth and with unrelated adults.
- Minors have significant and unexplained gaps in school attendance.
- Minors have contracted sexually transmitted diseases.
- Minors have symptoms of post-traumatic stress including anxiety, depression, addictions, panic attacks, phobias, paranoia or hyper vigilance, or apathy.
- Minors are not in control of their own identification documents.
- Minors do not live with their parent(s) or know the whereabouts of their parent(s).

Recognizing Child Abuse and Neglect (Sexual abuse)

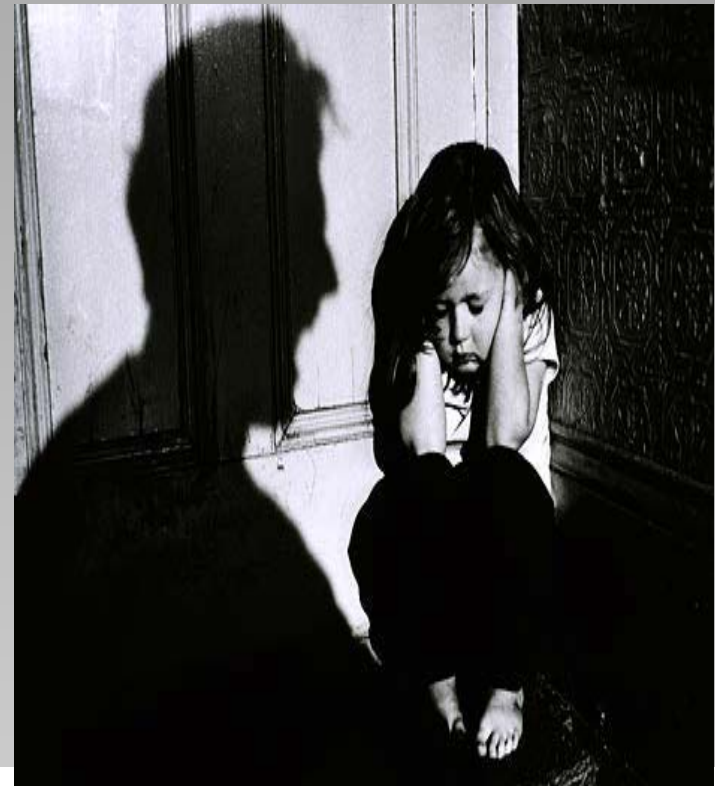
Sexual abuse indicators:

- Running away.
- Becoming pregnant or contracting a venereal disease.
(especially in children 14 years or younger)
- Acts secretive and isolated.
- Self-reports sexual abuse.

(Any of these indicators, when considered individually or together, may or may not be indicative of sexual abuse.)

Recognizing Child Abuse and Neglect (Mental injury)

A pattern of physical or verbal acts and omissions on the part of the parent or person responsible for the child that results in the psychological or emotional injury/impairment TO a child OR places a child at significant risk of being psychologically or emotionally injured/impaired (depression, anxiety, lack of attachment, fear of abandonment or safety, Fear that life or safety is threatened).



Recognizing Child Abuse and Neglect (Mental injury)

Mental injury Indicators:

- Exhibits extremes in behavior (overly compliant or demanding, extremely passive or aggressive).
- Is inappropriately child-like or inappropriately infantile.
- Exhibits physical or emotional developmental delays.
- Has attempted suicide.
- Self-reports abuse.
- Parent constantly blames, belittles or berates child.
- Rejects offers of help for the child.

Recognizing Child Abuse and Neglect (Neglect)

- Physical neglect
- Failure to protect
- Improper supervision
- Abandonment
- Medical neglect



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Recognizing Child Abuse and Neglect (Neglect)

Neglect Indicators:

- Frequent absence from school.
- Beggars or steals money for food.
- Lacks needed medical, dental or other health care services.
- Lacks sufficient clothing for weather.
- Abuses drugs and/or alcohol.
- Says no one is home to care for child(ren).

Recognizing Child Abuse and Neglect (Neglect)

Neglect indicator example:



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Recognizing Child Abuse and Neglect (Maltreatment)

Child maltreatment is defined as the treatment of a child that involves cruelty or suffering that a reasonable person would recognize as excessive.



Recognizing Child Abuse and Neglect (Other)

Threatened Harm – Two Forms:

- A threat to the safety of a child that is based on a current action or inaction by a person responsible for the child's health and welfare.
- A threat to the safety of a child that is based on the history of child abuse and/or neglect of the person responsible for the child's health and welfare or a non-parent adult, or a conviction(s) of crimes against children.

Recognizing Child Abuse and Neglect (Other)

Domestic Violence (DV)

- A pattern of assaultive and coercive behaviors, including physical, sexual and psychological attacks and economic coercion.
- DV cases make up 30 to 60% of all CPS investigations; 70 to 80% of which are open cases.

Recognizing Child Abuse and Neglect (Other)

Parental Substance Abuse

- Alcohol
- Methamphetamine
- Marijuana
- Cocaine
- LSD
- Huffing
- Prescription drugs



- ❖ Parental drug use must have an impact on parenting or drugs must be sold from the family home.

Recognizing Child Abuse and Neglect (Other)

Special Complex Cases

- **Failure to Thrive** (for medical or environmental reasons)
- **Medical Child Abuse** (formerly Munchausen by Proxy; requires a comprehensive medical exam)
- **Drug Endangered Children** (see the DEC protocol)
- **Child Sex Trafficking; Labor Trafficking**

Recognizing Child Abuse and Neglect (Other)

Special Complex Cases (continued)

Shaken Baby Syndrome/Abusive Head Trauma

- Caused by violently shaking a baby or child.
- Can cause subdural hematoma (bleeding on the brain).
- Long bone fractures.
- Retinal hemorrhaging and/or detachment.
- ❖ **Indicators include convulsions, extreme irritability, pale or blue skin, lethargy, sleepiness, not smiling or difficulty breathing.**

Recognizing Child Abuse and Neglect (Other)

Special Complex Cases (continued)

SUIDS and Safe Sleep



Recognizing Child Abuse and Neglect (Other)

Special Complex Cases (continued)

SUIDS (Sudden Unexplained Infant Death)

- Deaths in infants less than one year of age that occur suddenly and unexpectedly, and whose cause of death are not immediately obvious prior to investigation (CDC definition).
- Investigative conclusions may include accidental suffocation (ex. unsafe sleep practices), poisoning or overdose, infection, metabolic disorders, hyper or hypothermia.

Recognizing Child Abuse and Neglect (Other)

SUIDS – preventing infant suffocation

Safe Sleep practices:

- Safest place for an infant to sleep is in a crib, bassinet or portable crib that meets current safety standards.
- Use a firm mattress with a tightly fitted sheet-*no extras in the crib with the baby.*
- Baby should sleep alone and on its back.
- Use a sleep sack instead of a blanket.



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What is NOT investigated?

- Issues SOLELY attributed to poverty
- Homelessness
- Educational neglect
- Head lice
- Sibling on sibling abuse

❖ *Taken by themselves, these examples are not indicators of neglect; they may be factors that are evaluated in other case assignments.*

Reporting

Mandated Reporting

- **Mandated reporters are an essential part of the child protection system since they have an enhanced capacity, through their expertise and direct contact with children, to identify suspected child abuse or neglect.**

Reporting

Why report?

- By reporting you can make a tremendous difference in the life of a child and a child's family, especially if you help stop the abuse early.
- Early identification and treatment can help mitigate the long term effects of abuse.
- Parents may also benefit from support, parent training or anger management.
- **Protect a child, protect a family**

Reporting Report or Don't Report?

- Mandated Reporters should “trust your instincts.”
- Taken individually, indicators may mean nothing.
- Reasonable suspicion is enough to justify reporting.
- **You don't need evidence, just *reasonable suspicion***
 - ❖ **Note: *Never* investigate on your own.**

Reporting

Concerns of reporters and responses

- **"I don't want to interfere in someone's family."**
 - **If you don't, who will?**
- **"What if I break up someone's home?"**
 - **What if a child continues to get hurt?**
- **"They will know it was me who called."**
 - **CPS cannot provide this information without your permission or a court order.**
- **"What I have to say won't make a difference."**
 - **You may never know the difference you will make. Do the right thing anyway.**

Reporting

Reporting Obligations

- **Immediate verbal report to DHS**
 - **1-855-444-3911**
 - Be prepared to give as much demographic information as possible when making the call
- **Written report (DHS 3200) within 72 hours**
 - Detailed information
 - Child's statements in quotations
- **Notify the head of your organization if required by your employer**

Reporting

What to do when a child discloses abuse

- Move the child to a private area.
- Maintain direct eye contact.
- Do not display any signs of shock.
- Do not display signs of disapproval.
- Ask open ended questions ("how" and "what").
- After speaking with the child, take detailed notes about the conversation.

Reporting Next Steps for CPS

Centralized Intake will gather the following from the reporter:

- Name of the child, parents, and/or legal guardians.
- Description of suspected abuse or neglect.
- Any information that might establish the cause of abuse or neglect.
- The who, what, when, where, why and how's.
- Your contact information.

Reporting Next Steps for CPS

- Complaint will be reviewed for assignment.
- If assigned, caseworker begins an investigation.
- Disposition of the case is due within 30 days of assignment.
(decision whether or not to open or deny the case)
- Services referred to family.
- Child removal if safety cannot be ensured.
- Termination of parental rights if parents do not make the necessary changes.

Reporting Next Steps for CPS

- CPS will interview children, adults, neighbors, family, professional staff, etc...
- CPS will coordinate with law enforcement in certain investigations.
- CPS will look for all types of abuse/neglect during an investigation.
- CPS will look at prior history and review for trends.
- Worker is required to contact all mandated reporters prior to the case disposition.

Reporting Next Steps for CPS

Confidentiality

- CPS will keep your information confidential.
- Per CPL, the identity of the reporting person is confidential subject to disclosure only with the consent of that person or by judicial process.
- The parents may accuse you of reporting.
- The parents may say that, "CPS told me you were the one who called in the referral."

Your Information Will Not Be Shared

Reporting Next Steps for CPS

- Must meet legal definition of CA/N by a Preponderance of evidence (51%).
- If a preponderance exists, a Risk Assessment is used to determine risk levels.
- Approximately 75% of investigations do not result in a preponderance finding.
- DHS shall inform mandated reporters in writing as to the disposition of the case.

Reporting: Next steps for CPS

Notification Process for Mandated Reporters includes:

- If the reported event is **NOT** assigned for investigation, you will be receiving a letter from Centralized Intake.
- If the reported event **IS** investigated, you will be receiving a letter from the appropriate DHS county office.
- This letter will tell you only what the case determination is, but will NOT include the name of the family, or any other identifying information. Use the assigned Intake I.D. number you received when you initially made the first report for follow-up tracking purposes.

Reasons for a Report NOT being Investigated (AKA "Rejected")

- Already Investigated (or current open investigation).
- Discounted After Preliminary Investigation.
- Complaint Does Not Meet Child Protection Law Definition of Child Abuse/Neglect.
- No Reasonable Cause.
- Reporting Person Unreliable or Not Credible.
- Out-of-State History Notification.

Reporting Next Steps for CPS

Preponderance of Abuse/Neglect

Category I - Court Intervention

Category II - Mandatory Services with Central Registry Perpetrators

Category III - Preponderance but no Central Registry Perpetrator

No Preponderance of Abuse/Neglect

Category IV - No Preponderance

Category V - Unable to locate or no foundation for investigation

Other Initiatives and Updates Michigan Child Welfare

- **Birth Match System**
- **MiSACWIS**
- **Lower caseload counts**
- **Centralized Intake**
- **Trauma Informed Therapy**
- **Better and more consistent trainings**
- **Safe Sleep Initiative**

Other Initiatives and Updates Michigan Prevention

- **Prevention is the best hope for reducing child abuse and neglect**
 - **Primary Prevention:** Taking action prior to any abuse being identified, mainly at the education, awareness and support level.
 - **Secondary Prevention:** Taking action for children and families that are at risk.
 - **Tertiary Prevention:** Services for children in families where maltreatment has occurred to reduce negative consequences of the maltreatment and to prevent recurrence.
- **The costs of prevention programming are a fraction of the child abuse treatment costs, depending upon the model used.**

What You Can Do

- Report Abuse and Neglect.
- Learn more about and support the Michigan Children's Trust Fund (<http://michigan.gov/ctf>).
- Advocate funding for prevention services.
- Consider fostering or adoption.
- Help carry the message that we can't do this work without coordination or collaboration.



Contact Information

CPS Centralized Intake:

1-855-444-3911

CPS Program Office:

1-517-335-3704

Mandated Reporter Hotline:

1-877-277-2585

Children's Trust Fund:

1-517-373-4320

Additional Information

DHS Mandated Reporter Resource Guide can be found at:

http://www.michigan.gov/documents/dhs/Pub-112_179456_7.pdf?20131115142408